## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Working America Coalition	
	C C00620583
Check if 24-hour report	
Full Name of Payee	Date of Public Distribution/Dissemination
Mosaic	M M / D D / Y Y Y Y
Mailing Address 4801 Viewpoint Place	10 06 2016 Amount
City State Zip Code	120.00
Cheverly MD 20781	Transaction ID : D601309  Date of Disbursement or Obligation
Purpose of Expenditure Fliers  Category/ Type 004	10 06 / Y Y Y Y Y
Name of Federal Candidate Support C	Office Sought: House District:
TRUMP, DONALD, J., ,	🗶 President Senate State:
Calcillati Total To Bato	Disbursement For: Primary General 2016
Full Name of Payee	Other (specify)
Mosaic	Date of Public Distribution/Dissemination  10 06 2016
Mailing Address 4801 Viewpoint Place	15 15 2515
· ·	Amount
City State Zip Code	120.00
Cheverly MD 20781	Transaction ID : D601313
Purpose of Expenditure Category/	Date of Disbursement or Obligation
Fliers Category 004	10 06 2016
Name of Federal Candidate	Office Sought: House District:
Rodham Clinton, Hillary, , ,	➤ President Senate State:
Calendar Year-To-Date	Disbursement For: Primary X General
	2016 Other (specify) ▶
(a) CURTOTAL of Itagrical Independent Funcacility	
(a) SUBTOTAL of Itemized Independent Expenditures	240.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
King, Crystal, , ,  [Electronically Filed] Date	10 17 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature [Electronically Filea] Date	.0 17 2010